

<i>SERFF Tracking Number:</i>	<i>UNAM-126841970</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Nationwide Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>46961</i>
<i>Company Tracking Number:</i>	<i>NW PRE 2011 AR</i>		
<i>TOI:</i>	<i>MS021 Individual Medicare Supplement - Pre-Standardized</i>	<i>Sub-TOI:</i>	<i>MS021.000 Medicare Supplement - Pre-Standardized</i>
<i>Product Name:</i>	<i>Pre-Standardized Medicare Supplement</i>		
<i>Project Name/Number:</i>	<i>NW PRE 2011 AR/1522(1535), et al</i>		

Filing at a Glance

Company: Nationwide Life Insurance Company

Product Name: Pre-Standardized Medicare Supplement SERFF Tr Num: UNAM-126841970 State: Arkansas

TOI: MS021 Individual Medicare Supplement - Pre-Standardized SERFF Status: Closed-Approved-Closed State Tr Num: 46961

Sub-TOI: MS021.000 Medicare Supplement - Pre-Standardized Co Tr Num: NW PRE 2011 AR State Status: Approved-Closed

Filing Type: Rate Reviewer(s): Stephanie Fowler

Authors: Carmen Boyd, Trudi

Goldenberg Disposition Date: 10/15/2010

Date Submitted: 10/04/2010 Disposition Status: Approved-Closed

Implementation Date Requested: 04/01/2011

Implementation Date: 04/01/2011

State Filing Description:

General Information

Project Name: NW PRE 2011 AR

Project Number: 1522(1535), et al

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact: 11%

Filing Status Changed: 10/15/2010

Deemer Date:

Submitted By: Trudi Goldenberg

Status of Filing in Domicile: Pending

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Explanation for Other Group Market Type:

State Status Changed: 10/15/2010

Created By: Trudi Goldenberg

Corresponding Filing Tracking Number: NW PRE 2011 AR

Filing Description:

Nationwide Life Insurance Company

NAIC # 66869

Request for Rate Revision – Individual Pre-Standardized Medicare Supplement

Forms: 1522(1535), et al

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Nationwide Life Insurance Company is requesting a 11% rate increase on all Pre-Standard Medicare Supplement plans. This is a closed block of business and is fully reinsured by Constitution Life Insurance Company.

Company and Contact

Filing Contact Information

Trudi Goldenberg,	tgoldenberg@uafc.com
P.O. Box 958465	407-628-1776 [Phone] 8278 [Ext]
Lake Mary, FL 32795-8465	

Filing Company Information

Nationwide Life Insurance Company	CoCode: 66869	State of Domicile: Ohio
P.O. Box 958465	Group Code:	Company Type:
Lake Mary, FL 32795-8465	Group Name:	State ID Number:
(407) 995-8000 ext. 8319[Phone]	FEIN Number: 31-4156830	

Filing Fees

Fee Required?	Yes
Fee Amount:	\$100.00
Retaliatory?	Yes
Fee Explanation:	
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Nationwide Life Insurance Company	\$100.00	10/04/2010	40204387

SERFF Tracking Number:	UNAM-126841970	State:	Arkansas
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Company Tracking Number:	NW PRE 2011 AR		
TOI:	MS02I Individual Medicare Supplement - Pre-Standardized	Sub-TOI:	MS02I.000 Medicare Supplement - Pre-Standardized
Product Name:	Pre-Standardized Medicare Supplement		
Project Name/Number:	NW PRE 2011 AR/1522(1535), et al		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Stephanie Fowler	10/15/2010	10/15/2010

SERFF Tracking Number: UNAM-126841970 State: Arkansas

Filing Company: Nationwide Life Insurance Company State Tracking Number: 46961

Company Tracking Number: NW PRE 2011 AR

TOI: MS021 Individual Medicare Supplement - Pre-Standardized Sub-TOI: MS021.000 Medicare Supplement - Pre-Standardized

Product Name: Pre-Standardized Medicare Supplement

Project Name/Number: NW PRE 2011 AR/1522(1535), et al

Disposition

Disposition Date: 10/15/2010

Implementation Date: 04/01/2011

Status: Approved-Closed

Comment: The requested rate increase has been approved to be implemented on or after April 1, 2011. This approval is subject to the following:

- Increases will not be given more frequently than once in a twelve-month period;
- The insured shall be notified by the insurer of its intention to increase the rate for renewal not less than thirty (30) days prior to the effective date of the renewal.

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
Nationwide Life Insurance Company	11.000%	11.000%	\$768	2	\$6,981	11.000%	11.000%

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Approved	No
Rate	Current and Requested Rates	Approved	Yes

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Rate Information

Rate data applies to filing.

Filing Method:	SERFF
Rate Change Type:	Increase
Overall Percentage of Last Rate Revision:	10.000%
Effective Date of Last Rate Revision:	04/01/2010
Filing Method of Last Filing:	SERFF

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
Nationwide Life Insurance Company	11.000%	11.000%	\$768	2	\$6,981	11.000%	11.000%

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Rate/Rule Schedule

Schedule Item Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:	Rate Action Information:	Attachments
Approved 10/15/2010 Rates	Current and Requested 1522(1535), et al	New			AR Pre-Std Rates.pdf

Nationwide Life Insurance Company

**Actuarial Justification for A&H Rate Increase
Individual Pre-Standardized Medicare Supplement Plans**

Exhibit A - Current and Requested Premium Rates

<u>Form</u>	<u>Age at Issue</u>	<u>Current Rate</u>	<u>Requested Rate</u>
1522	65-80+	3,574	3,968

	Factor
Semi-Annual	0.510
Quarterly	0.265
Monthly	0.087